

OAHU CANDIDATES:  
SUBMIT 1 ORIGINAL AND 1 COPY  
NEIGHBOR ISLAND CANDIDATES:  
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT  
CANDIDATE COMMITTEE

RECEIVED

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES")

SECTION I CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

BERTHA C. KAWAKAMI

(b) Committee Name:

FRIENDS OF BERTHA C. KAWAKAMI

(c) Mailing Address:

P. O. BOX 52

HANAPEPE, HI 96716

(d) Phone (Bus)

335-8585

(Res)

335-5007

Treasurer's

SECTION II-TYPE OF REPORT: 24 19:22

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary ☐ Amended

☐ 2nd Preliminary Primary ☐ Short Form<sup>1</sup>

☐ Final Primary

☐ Preliminary General

☐ Final Election Period

☒ Supplemental

REPORTING PERIOD

7/1/99 through 12/31/99

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS  
(Complete Section III (Part 2) on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD <sup>2</sup> TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period <sup>3</sup> (Continuing Committee) OR at the time the Organizational Report was Filed (New Committee).....		87,693.26
2. Cash on Hand at the Beginning of this Reporting Period.....	79,873.23	
3. Total Receipts with Loans (From Line 17, Column A and B).....	1,693.77	28,094.02
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	81,567.00	115,787.28
5. Total Disbursements (From Line 21, Column A and B).....	24,320.82	58,541.10
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	57,246.18	57,246.18
7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Beginning of this Reporting Period.....	-0-	
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A).....	-0-	
(c) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Closing of this Reporting Period (Add Lines 7(a) and 7(b)).....	-0-	
8. Total of Loans at the Closing of this Reporting Period (Schedule E, Line 10).....	-0-	
9. Debts Owed BY the Candidate Committee at the Closing of this Reporting Period (Add Lines 7(c) and 8).....	-0-	
10. Other Adjustments to Surplus/Deficit (Attach Explanation).....	-0-	
11. Subtotal (Add Lines 9 and 10).....	-0-	
12. Surplus/Deficit (Subtract Line 11 from Line 6).....	57,246.18	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Bertha C. Kawakami  
Candidate Signature

1/22/00  
Date

Jeffrey L. Enos  
Treasurer Signature

1/22/00  
Date

<sup>1</sup> Short Form: is checked if the candidate is filing a Preliminary, Final or Supplemental Report and received no contributions, made no expenditures, and had a deficit or surplus of \$2,000 or less for the reporting period. Short form reporting requires completion of only Section I, Section II, and Section III, Part 1 of this Disclosure Report.  
<sup>2</sup> An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

## SECTION III (Part 2)-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(If Necessary, Complete Schedules A through H Before Completing This Section)

COLUMN A

COLUMN B  
ELECTION PERIOD  
TOTAL TO DATE

## RECEIPTS

## TOTAL THIS PERIOD

## 13. Contributions From:

## (a) Individuals/Other Entities/Noncandidate Committees

(i) Monetary Contributions of \$100 or Less.....

432.50

11,807.00

(ii) Non-Monetary Contributions of \$100 or Less.....

-0-

-0-

(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100  
(Schedule A, Line 2 for Column A).....

1,000.00

15,260.00

(iv) Total Contributions from Individuals/Other Entities/Noncandidate  
Committees (Add Lines (a)(i) through (a)(iii) for Columns A and B).....

1,432.50

27,067.00

## (b) Political Parties

(i) Monetary Contributions of \$100 or Less.....

-0-

-0-

(ii) Non-Monetary Contributions of \$100 or Less.....

-0-

-0-

(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100  
(Schedule G, Line 2 for Column A).....

-0-

-0-

(iv) Total Contributions from Political Parties (Add Lines (b)(i) through  
(b)(iii) for Columns A and B).....

-0-

-0-

## (c) Candidate or Candidate's Immediate Family

(i) Monetary Contributions of \$100 or Less.....

-0-

-0-

(ii) Non-Monetary Contributions of \$100 or Less.....

-0-

-0-

(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100  
(Schedule D, Line 2 for Column A).....

-0-

-0-

(iv) Total Contributions from Candidate or Candidate's Immediate Family  
(Add Lines (c)(i) through (c)(iii) for Columns A and B).....

-0-

-0-

(d) Total Contributions (Add Lines 13(a)(iv), 13(b)(iv) and 13(c)(iv) for Columns A  
and B).....

1,432.50

27,067.00

14. Public Funds and Other Receipts (Schedule C, Line 2 for Column A).....

261.27

1,027.02

15. Total Receipts without Loans (Add Lines 13(d) and 14 for Columns A and B).....

1,693.77

28,094.02

## 16. Loans From:

(a) Candidate or Candidate's Immediate Family (Schedule E, Line 1 for Column A).....

-0-

-0-

(b) Financial Institutions (Schedule E, Line 4 for Column A).....

-0-

-0-

(c) Other Sources (Schedule E, Line 7 for Column A).....

-0-

-0-

(d) Total Loans (Add Lines 16(a) through 16(c) for Columns A and B).....

-0-

-0-

17. Total Receipts with Loans (Add Lines 15 and 16(d) for Columns A and B).....

1,693.77

28,094.02

## DISBURSEMENTS

18. Expenses (Schedule B, Line 3 for Column A).....

14,010.82

28,532.78

19. Fundraising Expenditures (Schedule F, Line 3 for Column A).....

10,310.00

30,698.32

## 20. Loans Repaid or Forgiven:

(a) Candidate or Candidate's Immediate Family (Schedule E, Line 2 for Column A).....

-0-

-0-

(b) Financial Institutions (Schedule E, Line 5 for Column A).....

-0-

-0-

(c) Other Sources (Schedule E, Line 8 for Column A).....

-0-

-0-

(d) Total Loans Repaid or Forgiven (Add Lines 20(a) through 20(c) for Columns A  
and B).....

-0-

-0-

21. Subtotal Disbursements (Add Lines 18, 19, and 20(d) for Columns A and B).....

24,320.82

58,541.10

22. Expenditures and Fundraising Expenditures (Unpaid) (Schedule H, Line 7 for  
Column A) (Net Change This Period).....

-0-

23. Total Disbursements (Add Lines 21 and 22 for Columns A and B).....

24,320.82

58,541.10

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
BY INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
CANDIDATE COMMITTEE**

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

FRIENDS OF BERTHA C. KAWAKAMI

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	REQUIRED IF AGGREGATE IS \$1,000 OR MORE NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION (IF INDIVIDUAL)		
10/8/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	Lenscrafters, Inc. P. O. Box 429850 Cincinnati, OH 45242		300.00	300.00
10/8/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	Philip Morris management Corp. 915 L Street, Suite 1410 Sacramento, CA 95814		500.00	500.00
10/23/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	HEMEP Fund 1935 Hau St., Room 300 Honolulu, HI 96819		200.00	200.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (THIS PAGE)..... 1,000.00

2. TOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 13 (bottom), COLUMN A)..... 1,000.00

Form CC-5(A) (Rev. 11/97)

**STATE OF HAWAII**  
**CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B**  
**EXPENDITURES**  
**CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 7

FRIENDS OF BERTHA C. KAWAKAMI

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
7/19/99	Democratic Party of Kauai P. O. Box 3936 Lihue, hi 96766	Donation	125.00
7/19/99	Ready to Learn 680 Iwilei Rd., #430 Honolulu, HI 96817	Donation	125.00
7/19/99	Hawaii Children's Discovery Center 111 Ohe St. Honolulu, HI 96813	Donation	100.00
7/19/99	Waikiki Health Center 277 Ohua Ave. Honolulu, HI 96815	Donation	100.00
7/19/99	The ARC in Hawaii 3989 Diamond Head Rd. Honolulu, HI 96816	Donation	50.00
7/19/99	Honolulu Theatre for Youth 2846 Ualena St. Honolulu, HI 96819	Donation	175.00
7/19/99	Honolulu Symphony 650 Iwilei Rd., Suite 202 Honolulu, HI 96817	Donation	100.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 775.00
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A).....

Form CC-5(B) (Rev. 11/97)

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:  
FRIENDS OF BERTHA C. KAWAKAMI

PAGE 2 OF 7

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
7/19/99	Kauai High & Int. Project Graduation P. O. Box 3343 Lihue, HI 96766	Donation	100.00
7/29/99	Hanapepe Colt/Palomino Baseball P.O. Box 167 Hanapepe, HI 96716	Donation	500.00
7/29/99	Kalaheo Youth Basketball P. O. Box 992 Kalaheo, HI 96741	Donation	100.00
7/29/99	Contractors Association of Kauai 4231 Ahukini Rd. Lihue, HI 96766	Donation	100.00
7/29/99	Waimea Colt Baseball P. O. Box 59 Waimea, HI 96796	Donation	500.00
8/1/99	Kaumakani Basketball Assoc. Kaumakani, HI 96747	Donation	200.00
8/1/99	Kauai Jr. Olympics Softball P. O. Box 317 Hanapepe, HI 96716	Donation	250.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 1,750.00
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A).....

Form CC-5(B) (Rev. 11/97)

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

FRIENDS OF BERTHA C. KAWAKAMI

PAGE

3

OF

7

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
8/10/99	HOPACO Honolulu, HI 96817	Toner Cartridge (Reimbursed 8/20/99)	98.93
8/13/99	U. S. Postal Service Downtown Station Honolulu, HI 96813	Stamps	198.00
8/24/99	Kauai Pop Warner Football League P. O. Box 127 Kekaha, HI 96752	Donation	75.00
8/26/99	Hanapepe Postmaster Hanapepe, HI 96716	Stamps	81.00
8/27/99	Kauai Filipino Women's Club 4036 Palikea St. Lihue, HI 96766	Tropy for Terno Ball	75.00
8/29/99	Waimea High School Athletic Program P. O. Box 339 Waimea, HI 96796	Football Program Ad	300.00
9/1/99	The Honolulu Advertiser P. O. Box 29660 Honolulu, HI 96820	Subscription	45.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 872.93
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE, ENTER TOTAL FROM SCHEDULE H, LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION II (PART 2), LINE 18, COLUMN A).....

Form CC-3(B) (Rev. 11/97)

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 4 OF 7

FRIENDS OF BERTHA C. KAWAKAMI

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9/3/99	West Kauai Business & Professional Assoc. P. O. Box 903 Waimea, HI 96796	Donation	250.00
9/8/99	Hawaii Public Television 2350 Dole St. Honolulu, HI 96822	Donation	100.00
9/13/99	TAG Designs 222 Merchant St., #102 Honolulu, HI 96813	1999 Legislative Session Brochure	7,500.00
9/16/99	Big Save, Inc. P. O. Box 68 Eleele, HI 96705	Donation of Soda for ILWU Picnic	32.71
10/5/99	Kauai Council of Filipino Catholic Clubs P. O. Box 3054 Lihoe, HI 96766	Souvenir Book Ad	90.00
10/8/99	Big Save, Inc. P. O. Box 68 Eleele, HI 96705	Donation of Gift Certificate for Kalaheo School Fundraiser	50.00
10/14/99	Hawaii Family Support Center 55 Merchant St., 22nd Floor Honolulu, HI 96813	Donation	100.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 8,122.71
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A).....

Form CC-5(B) (Rev. 11/97)

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 5 OF 7

FRIENDS OF BERTHA C. KAWAKAMI

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10/14/99	Malama Pono P. O. Box 1950 Lihue, HI 96766	Donation	100.00
10/14/99	The Garden Island 3137 Kuhio Hwy. Lihue, HI 96766	Subscription	72.00
10/14/99	Waikiki Health Center 277 Ohua Ave. Honolulu, HI 96815	Donation	80.00
10/23/99	County of Kauai 4444 Rice St., Lihue, HI 96766	Donation Uncle Tony Memorial Fund	500.00
11/3/99	Postmaster Kalaheo Kalaheo, HI 96741	Stamps	140.00
11/3/99	Claron Nakamatsu 297 Makani Rd. Kapaa, HI 96746	Donation	100.00
11/3/99	Waimea High School P. O. Box 339 Waimea, HI 96796	Donation Travis Fernandez	200.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 1,192.00
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION 11 (PART 2), LINE 18, COLUMN A).....

Form CC-5(B) (Rev. 11/97)



**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 6 OF 7

FRIENDS OF BERTHA C. KAWAKAMI

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
11/15/99	SHOPO 201 Merchant St., #1620 Honolulu, HI 96813	Donation	250.00
11/22/99	Child & Family Services 200 N. Vineyard Blvd., Bldg. B Honolulu, HI 96817	Donation	50.00
11/22/99	Friend's of the Children's Advocacy Center 677 Ala Moana Blvd., Suite 725 Honolulu, HI 96813	Donation	75.00
11/30/99	Hawaii Consortium for the Arts P. O. Box 23209 Honolulu, HI 96823	Donation	50.00
11/30/99	TAG Designs 222 Merchant St., Suite 102 Honolulu, HI 96813	Design & typeset Kauai Kauai Filipino Ad.	56.00
12/6/99	Postmaster Kalaheo Kalaheo, HI 96756	Stamps	131.00
12/7/99	The Salvation Army 4182 Hardy St. Lihue, HI 96766	Donation	100.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 712.00
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 1).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 1B, COLUMN A).....

Form CC-5(B) (Rev. 11/97)

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 7 OF 7

FRIENDS OF BERTHA C. KAWAKAMI

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
12/7/99	Kauai Habitat for Humanity P. O. Box 3557 Lihue, HI 96766	Donation	100.00
12/8/99	Craine Institute of Neuropsychology 1360 S. Beretania St. Honolulu, HI 96814	Donation	100.00
12/13/99	Zippy's 59 N. Vineyard Blvd. Honolulu, HI 96813	Legislative Luncheon (Reimbursed by Allowance Fund)	162.34
12/15/99	Long's Drugs 3221 Waiialae Ave. Honolulu, HI 96816	Christmas Cards	151.55
12/17/99	Kinko's 590 Queen St. Honolulu, HI 96813	Opening Day Invitations	72.29

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 586.18
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4)..... -0-
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A)..... 14,010.82

Form CC-3(B) (Rev. 11/97)

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
SCHEDULE C  
PUBLIC FUNDS AND OTHER RECEIPTS  
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

FRIENDS OF BERTHA C. KAWAKAMI

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
8/20/99	Bertha C. Kawakami P. O. Box 52 Hanapepe, HI 96716	Reimbursement for Hopaco invoice.	98.93	98.93
12/22/99	Bertha C. Kawakami P. O. Box 52 Hanapepe, HI 96716	Reimbursement for Legislative Luncheon	162.34	261.27

1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (THIS PAGE)..... 261.27

2. TOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION 11 (PART 2) LINE 14, COLUMN A)..... 261.27

Form CC-5(C) (Rev. 11/97)

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE F  
FUNDRAISING EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:  
FRIENDS OF BERTHA C. KAWAKAMI

PAGE 1 OF 1

DATE OF FUNDRAISING EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF FUNDRAISING EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID FUNDRAISING EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
11/30/99	TAG Designs 222 Merchant St., #102 Honolulu, HI 96813	Tickets, Letters & Envelopes for Fundraiser	3,010.00
12/22/99	Kippen Chu 636 12th Ave. Honolulu, HI 96816	Reimbursement for Fund-raiser invoices.	7,300.00

1. SUBTOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (THIS PAGE)..... 10,310.00
2. TOTAL OF UNPAID FUNDRAISING EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE, ENTER TOTAL FROM SCHEDULE H, LINE 5)..... -0-
3. TOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 19, COLUMN A)..... 10,310.00

Form CC-5(F) (Rev. 11/97)